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INVOICING TRAVEL FOR UNLICENSED RELATIVE PLACEMENTS

Effective September 1, 2012

Last Updated: August 3, 2012

Changes are being made to invoicing travel for unlicensed relative placements. The changes are noted in bold below.

Prior to completing your travel invoice, you will need to do two things:

1. Complete a Vendor Information Form (State Form #53788). The form may be found on the DCS website (www.in.gov/dcs) by clicking the “Forms” tab on the left, and scrolling to the “Finance” section. Completion of this form is necessary to obtain an “ST number” that will be required before payment can be made to you. Once completed, you should submit the Vendor Information Form to the following address:

DCS Resource Unit
402 W Washington St, W392
Indianapolis, IN 46204

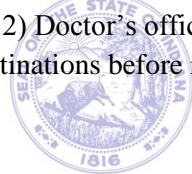
2. Please review the reimbursable travel definitions below to ensure that you only log travel that is approved. Documenting travel that is not approved will likely cause delays or denials of invoices.

Travel Invoice Instructions

1. Fill in the children’s person ID #'s and days placed in your home during the invoice month at the top right corner of the travel invoice. **All children placed in your care during the invoice month must be included in this section.**
2. List each trip on the travel invoice separately for each destination.

For instance:

- A round trip to the doctor’s office is listed as two separate trips: 1) Home address to doctor’s office address; and 2) Doctor’s office address to home address.
- A trip with two separate destinations before returning home would be listed as three



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separate trips: 1) Home address to doctor's office address; 2) Doctor's office address to DCS office address; and 3) DCS office address to home address.

3. For each trip, enter a date, starting address, ending/destination address, number of miles driven and a reason code.
 - **You should use the Mapquest (www.mapquest.com) website to get the shortest mileage distance for your trips. If you are unable to do so and use your car odometer, please note that reimbursement to you will be based on the shortest distance on the website, so you may not be reimbursed for the exact amount you put on your invoice.**
 - The reason codes are listed just under the logo in the upper left hand corner.
4. If you are using the form via computer:
 - The miles and claimable dollar amount within the invoice will add/multiply for you. You will be reimbursed the amount as shown in the "Total Claimable \$" box.
5. If you are unable to use the invoice via computer and need to complete it by hand, you will need to add/multiply for your totals:
 - Add all of the numbers in the "Miles Driven" column together. Place this number in the row at the bottom of the invoice that is titled "Total Miles Driven."
 - Take that number of "Total Miles Driven" and multiply it by .44 to get the total dollar amount you may claim. i.e. 62 X .44= \$27.28
 - Place the resulting total dollar amount in the last box at the bottom of the invoice titled "Total Claimable \$."
6. To complete your travel invoice:
 - Fill in the boxes at the bottom asking for your relative family name, address, e-mail, phone number, ST number, original signature, and date. (Please note that an original signature is necessary, and failure to provide one may result in denial of the invoice).
 - Submit the travel invoice to the address indicated on the form.

Travel Definitions

The relative caregiver may be reimbursed for properly claimed travel expenses incurred on behalf of a relative child placed in the home if the travel was made for any of the following purposes:

1. Travel between the relative family home and the school in which the child was enrolled before placement and continues to be enrolled while residing with the relative family, to the extent that school transportation is not provided or required to be provided under applicable Indiana law by a public school corporation or other state or local agency¹;
2. Travel to and from the following types of health related appointments²:
 - a. Doctor (primary care physician and any specialists)
 - b. Dentist (including orthodontist)
 - c. Health clinic
 - d. Hospital/Emergency Room (including relative caregiver visits during child inpatient episodes)
 - e. Occupational and Physical Therapists
 - f. Behavioral Health Counselor and Therapist
3. Travel to and from the following types of case activities:
 - a. Administrative case reviews
 - b. Judicial reviews (court appearances)
 - c. Case conferences
 - d. Child and family team meetings
 - e. Foster parent training sessions
 - f. Parent and/or sibling visits (including visits to other relatives that are authorized by the department and are a part the child's case plan) and visits to facilitate the transition to another placement
- 4. Travel to and from Headstart (if transportation not provided for by the school), summer school (if transportation not provided for by the school), pre-school (this does not include daycare), summer camps (if not for daycare) and school required extracurricular activities.**
- 5. For youth 16 years and older, travel to and from employment for the youth or job searching for the youth.**
- 6. Other travel that is extraordinary and has been approved by the local office director in writing prior to the travel taking place (e.g. out of state travel for an educational enrichment program for the child).**

¹ This does not include school extracurricular activities.

² This does not include trips to the pharmacy or the like to pick up medications, etc.